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**\*BIBDATASHEET\***

CONFIRMATION NO. 9763

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/832,729	<b>FILING OR 371(c) DATE</b> 04/09/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> P9520
<b>APPLICANTS</b> Robert F. Baugh, Parker, CO; Lisa M. Lim, Mill Creek, WA; Julie S. Eaton, Conifer, CO; John G. Rivera, Reading, PA; Victor D. Dolecek, Englewood, CO;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/063,338 04/20/1998 PAT 6,444,228 * which is a CIP of 08/640,278 04/30/1996 ABN (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 06/07/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 39	<b>TOTAL CLAIMS</b> 9
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> JEFFREY J. HOHENSHELL 710 MEDRONIC PARKWAY MINNEAPOLIS ,MN 55432				
<b>TITLE</b> AUTOLOGOUS PLATELET GEL DELIVERY SYSTEM				
<b>FILING FEE RECEIVED</b> 1952	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	